PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for

maintenance fee notificat	ions.		, , , , , , , , , , , , , , , , , , ,	-			
CURRENT CORRESPONDE	ENCE ADDRESS (Note: Use Bl	OP A P	Note Fee(pape have	e: A certificate of ma (s) Transmittal. This of ers. Each additional p e its own certificate of	ailing can only be used for certificate cannot be used for paper, such as an assignment f mailing or transmission.	r domestic mailings of the or any other accompanying nt or formal drawing, must	
136	7590 01/13	/2010	を)		icate of Mailing or Trans		
400 SEVENTH SUITE 600		APR 0 9 20	I he State addr trans	I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
WASHINGTON	, DC 20004	Mar 18	×*/			(Depositor's name)	
		RADEM				(Signature)	
						(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	A	TTORNEY DOCKET NO.	CONFIRMATION NO.	
10/549,567 09/19/2005			Peter Mullejans	P70821US0		9658	
TITLE OF INVENTION	: OSTOMY APPLIANC	E			1		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE F	FEE TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$300	\$0	\$1810	04/13/2010	
EXAMINER		ART UNIT	CLASS-SUBCLASS				
HAND, MELANIE JO		3761	604-339000				
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			(1) the names of up to or agents OR, alternative (2) the name of a single registered attorney or a 2 registered patent attorney or a single patent	e names of up to 3 registered patent attorneys ents OR, alternatively, ename of a single firm (having as a member a ered attorney or agent) and the names of up to stered patent attorneys or agents. If no name is no name will be printed.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Humlebaek, Denmark							
Please check the appropr	iate assignee category or	categories (will not be pr	inted on the patent):	Individual Corp	poration or other private gro	oup entity Government	
4a. The following fee(s) are submitted: Let Issue Fee (1510) Publication Fee (No small entity discount permitted) (300) Advance Order - # of Copies			b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. (1810) The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number06-1358 (enclose an extra copy of this form).				
5. Change in Entity Sta	tus (from status indicate s SMALL ENTITY state		_		ENTITY status. See 37 C		
		uired) will not be accepte tes Patent and Trademark		he applicant; a registo	ered attorney or agent; or the	ne assignee or other party in	
Authorized Signature	Harrey B	Jacol	L-	_{Date} April 9,	2010		
Typed or printed name Harvey B. Jacobsen, Jr.				Registratique Nati 120 185/02 00000049 10549567			
This collection of inform an application. Confiden submitting the complete this form and/or suggest	ation is required by 37 C tiality is governed by 35 d application form to the ons for reducing this bu	CFR 1.311. The information of U.S.C. 122 and 37 CFR U.S.P.TO. Time will vary rden, should be sent to the D.NOT SEND FEES OF	on is required to obtain or 1.14. This collection is estable the individual of the collection of fice of the collection	retain a benefit by the timated to take 12 mi vidual case. Any born er, U.S. Patent and Tr	epublic which is to file (and highes to complete, including the first on the amount of the rademark Office, U.S. Depositions.	d by the USE O appricess) g gathering, Meparing, and me you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450.	

Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.